

File with:  
Iowa Ethics and Campaign  
Disclosure Board  
510 E. 12<sup>th</sup>, Ste. 1A  
Des Moines, Iowa 50319  
Fax: 515-281-4073

Reset Form

FOR INSTRUCTIONS, SEE BACK OF FORM  
**DISCLOSURE SUMMARY PAGE**

COMMITTEE NAME (Must be same as on Statement of Organization)

Kruse for District I Supervisor

IMPORTANT: Indicate by # type of committee you are reporting for: 5

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party  
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political  
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

**CANDIDATE COMMITTEES ONLY:**

Candidate Name

LARRY W. KRUSE

Political Party (if applicable)

Republican

Office Sought

County Supervisor

District (if Senate or House)

FORM  
DR-2

(Rev. 07/2007)

DISCLOSURE  
REPORT

**For Office Use Only**

Comm. #

Logged In

Scanned

Computer

Audited

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

Jean M. Kruse

SIGNATURE OF PERSON FILING REPORT

319-469-2018

TELEPHONE

July 14, 2008

DATE SIGNED

I AM FILING A County/Local candidate REPORT FOR (1) ELECTION/(2) NON-ELECTION YEAR.

(report date)

Indicate by # 1

☒ CHECK IF AMENDMENT TO REPORT DATED June 13, 2008

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

Nov. 4, 2008

County & Local Committees, enter County in  
which Election is held

Lee

**STATEMENT OF CASH ON HAND**

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$

287.19

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below)

1,130.00

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....\$

1,417.19

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)

238.35

Schedule F: Loan Repayments total (Attach Schedule F)

CASH ON HAND at the end of this reporting period (if final report balance must be zero)

\$

1,178.84

\*\*UNPAID BILLS (From Schedule D - Attach Schedule D)

\$

\*\*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

\$

90.00

\*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

\$

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES ☒ NO

**CANDIDATE COMMITTEES ONLY:**

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

**STATE COMMITTEES:** Submit a reconciled campaign account bank statement in January of each year.

**CONTRIBUTIONS — MONEY TAKEN IN**

(Including candidate's personal funds)

<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	<b>MONETARY</b> <b>RECEIPTS</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**COMMITTEE NAME (Must be same as on Statement of Organization).**

KRUSE for DISTRICT I Supervisor

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**NOTE:** ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
6/11/08	ID# CK#	JEAN KRUSE 1243 170 <sup>TH</sup> AVE DONNELSON, IA 52625	Spouse	\$ 150. <sup>00</sup>	<input type="checkbox"/>
6/12/08	ID# CK#	DAN DUNAGAN 2654 BELMONT RD. KEOKUK, IA 52632		50. <sup>00</sup>	<input type="checkbox"/>
6/14/08	ID# CK#	RON + CAROL STUKERJURGEN 304 2 <sup>ND</sup> ST. HOUGHTON, IA 52631		25. <sup>00</sup>	<input type="checkbox"/>
6/17/08	ID# CK#	DAVE + KATHY HOUSTON 1384 308 <sup>TH</sup> AVE WEVER, IA 52658		100. <sup>00</sup>	<input type="checkbox"/>
6/17/08	ID# CK#	BILL MERSCHMAN 605 DOUGLAS CT. WEST POINT, IA 52656		250. <sup>00</sup>	<input type="checkbox"/>
6/17/08	ID# CK#	RAY + BECKY FULLenkamp 1723 WEST POINT RD. WEST POINT, IA 52656		25. <sup>00</sup>	<input type="checkbox"/>
6/17/08	ID# CK#	ROBERT + EDIE PIEPER 213 MAIN ST. HOUGHTON, IA 52631		25. <sup>00</sup>	<input type="checkbox"/>
6/20/08	ID# CK#	GENE + PAT WINNIKE 608 6 <sup>TH</sup> ST. WEST POINT, IA 52656		25. <sup>00</sup>	<input type="checkbox"/>
6/21/08	ID# CK#	JOYCE + DANNIE FRANCIS 1306 FAWN LANE RAWLINS, WY 82301		200. <sup>00</sup>	<input type="checkbox"/>
6/24/08	ID# CK#	LARRY + LINDA MENKE 107 LAKEVIEW RD. WEST POINT, IA 52656		200. <sup>00</sup>	<input type="checkbox"/>

SUB-TOTAL

\$1,050.<sup>00</sup>

TOTAL (If last page of this schedule)

\$

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Reset Form

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	<b>MONETARY RECEIPTS</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**COMMITTEE NAME (Must be same as on Statement of Organization)**

Kruse for District I Supervisor

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**NOTE:** ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
6/24/08	ID# CK#	ART + Joan Menke 610 Iowa Joe St. West Point, IA 52656		\$ 30.00	<input type="checkbox"/>
6/24/08	ID# CK#	Sylvan + Joan Nichtig 1336 Pilot Grove Rd. Pilot Grove, IA 52648		25.00	<input type="checkbox"/>
6/30/08	ID# CK#	BARBARA Bentler 1492 155 <sup>th</sup> Ave Donnellson, IA 52625		25.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 80.00

TOTAL (If last page of this schedule)

\$ 1130.00

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Page 2 of 2  
(for Schedule A)

**EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT**

SCHEDULE

**B**

(Rev. 07/03)

MONETARY  
EXPENDITURESCHECK THIS BOX IF  
AMENDING FORM

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTEE NAME (Must be same as on Statement of Organization)

Kruise for District I Supervisor

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
6/11/08	ID# CK#	U.S. POSTAL SERVICE Houghton, IA 52631	Postage Stamps for mailings	\$ 42.00
7/1/08	ID# CK#	Mississippi Valley Printing 606 Ave G Ft. Madison, IA 52627	Campaign T-Shirts	196.35
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 238.35
TOTAL (If last page of this schedule)				\$ 238.35

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(f).)

COMMITTEE NAME (Must be same as on Statement of Organization)

Kruse for District I Supervisor

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SCHEDULE <b>E</b> (Rev. 06/97)	IN-KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
6/12/08	PAT Breen 3074 Old Quarry Rd. Waver, IA 52658		8- 1/2 sheets ply wood	\$ 75.00	<input type="checkbox"/>
6/15/08	Jean Kruse 1243 170 <sup>th</sup> Ave Donnellson, IA 52625	spouse	Spray Paint	15.00	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
SUB-TOTAL				\$ 90.00	
TOTAL (if last page of this schedule)				\$ 90.00	

\*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1  
(for Schedule E)